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U.S. Patent Application
Attorney Docket: LEAP-1000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: **VACCARELLI, Vincent**

Examiner: **Bell, Paul A.**

U.S. Patent Application Serial No.: **09/821,578**

Group Art Unit: **2675**

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For: **MICROSCOPY LABORATORY SYSTEM**

Technology Center 2600

Filed: **March 29, 2001**

Certificate of Mailing

I certify that this Amendment and Request for Reconsideration is being deposited on March 18, 2003, with the U.S. Postal Service as first class mail under 37 C.F.R. §1.8 and is addressed to Box Non Fee Amendment, Commissioner for Patents, Washington, D.C. 20231.

Sumita Chowdhury Ghosh

Sumita Chowdhury-Ghosh
Reg. No. 50,476

AMENDMENT AND REQUEST FOR RECONSIDERATION

Box Non-Fee Amendment
Commissioner for Patents
Washington, D.C. 20231

Honorable Sir:

This Amendment and Request for Reconsideration is in response to the Office Action dated December 19, 2002.

Please amend the above-identified application as follows.

In the Claims

Please cancel Claims 12 and 13.

Please amend the following claim:

2675

AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Vincent Vaccarelli	Docket No. LEAP:101_US_
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Serial No. 09/821,578	Filing Date 03/29/2001	Examiner Paul A. Bell	Group Art Unit 2675
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Inventor: **PHOTOMICROSCOPY LABORATORY SYSTEM**

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TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.
 The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	20 -	21 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- No additional fee is required for amendment.
- Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.
- A check in the amount of _____ to cover the filing fee is enclosed.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0822
A duplicate copy of this sheet is enclosed.
 - Any additional filing fees required under 37 C.F.R. 1.16.
 - Any patent application processing fees under 37 CFR 1.17.

Sumita Chowdhury-Ghosh Dated: March 18, 2003

 Signature

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I certify that this document and fee is being deposited on March 18, 2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231
_____ Signature of Person Mailing Correspondence
Sumita Chowdhury-Ghosh, Ph.D. _____ Typed or Printed Name of Person Mailing Correspondence

SCG/KRB
 cc: